UTILITY PATENT

Attorney Docket APPLICATION 2132.007

TRANSMITTAL

FIRST NAMED INVENTOR OR APPLICATION IDENTIFIER

for nonprovisional applications under 37 CFR 1.53(b) Inventor Jackowski et al

TITLE:PROCESS FOR DIAGNOSIS OF PHYSIOLOGICAL CONDITIONS BY CHARACTERIZATION OF PROTEOMIC MATERIALS

EXPRESS MAIL LARGE NO. 1199000465 4119

See MPEP chapter 600 concerning utility patent appln.) Box Patent Application Fig. 2	EXPRESS MAIL LABEL NO.: US6080946540S	Date submitted:04/30/01	– දූව
1. X Fee Transmittal Form (Submit an original, and a duplicate for fee processing) X Specification 49 Total Pages (preferred arrangement set forth below) - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored & D - Reference to Microfiche Appendix - Background of the Invention - Brief Description of the Drawings (if filed) - Detailed Description of the Drawings (if filed) - Detailed Description of the Drawings (if filed) - Detailed Description - Brief Description of the Drawings (if filed) - Claim(s) - Claim(s) - Logy from a prior application - Abstract of the Disclosure 3. X Drawings() (35 USC 13) 1 New Sheets - X Decl./Pow. of Att. 3 Total pages (COPY) - A. Decl./Pow of Att. 3 Total pages (COPY) - Deteit on finventor(s) - Copy from a prior applic, 37 CFR 1.63(d)) - (for continuation/divisional with Box 17 completed) - Note Box 5 Below) - Signed statement attached deleting 16. X Other: 14 sheets of APPENDIX A inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b) - Signed statement attached deleting 16. X Other: 14 sheets of APPENDIX A inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b) - Incorporation By Reference (useable if Box 4b is checked) - The entire disclosure of the prior application, from which a copy of the Oath or Declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. 17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: - Continuation Divisional Continuation-in-part (CIP) of prior application by reference therein. 18. CORRESPONDENCE ADDRESS - Continuation Divisional Continuation-in-part (CIP) of prior application by reference therein. 19. CORRESPONDENCE ADDRESS - Customer Number or Bar Code Label or X Correspondence address below (Insert Customer No. Or Attach bar code label here) Cust. Mall December 1. See Statement 1. See Statement 1.			
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Michael A. Slavin McHale & Slavin, P.A. ADDRESS: 4440 PGA Blvd., Suite 402 CITY: Palm Beach Gardens STATE: FL ZIP CODE: 33410 COUNTRY: U.S.A. TELEPHONE: (561) 625-6575	0 . 31 1 5 0 1 7 1 1		
McHale & Slavin, P.A. ADDRESS: 4440 PGA Blvd., Suite 402 CITY: Palm Beach Gardens STATE: FL ZIP CODE: 33410 U.S.A. TELEPHONE: (561) 625-6575 FAX: (561) 625-6572	(Insert Customer No. Or Attach b	ar code label here) Cust. #2/19/1/	
ADDRESS: 4440 PGA Blvd., Suite 402 CITY: Palm Beach Gardens STATE: FL ZIP CODE: 33410 COUNTRY: U.S.A. TELEPHONE: (561) 625-6575 FAX: (561) 625-6572	NAME: Michael A. Slavin		
ADDRESS: 4440 PGA Blvd., Suite 402 CITY: Palm Beach Gardens STATE: FL ZIP CODE: 33410 COUNTRY: U.S.A. TELEPHONE: (561) 625-6575 FAX: (561) 625-6572	McHale & Slavin, P.A.		
CITY: Palm Beach Gardens STATE: FL ZIP CODE: 33410 COUNTRY: U.S.A. TELEPHONE: (561) 625-6575 FAX: (561) 625-6572			·
COUNTRY: U.S.A. TELEPHONE: (561) 625-6575 FAX: (561) 625-6572		ATE: FL ZIP CODE: 33410	
			
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FEE TRANSMITTAL for FY2001	~ -			er: N/A		
	•	Filing Date : N/A				
				tor: Jackowski et al		
Date: 04/30/01		ıp Art		: N/A		
	Exar	niner N	lame	: N/A		
Total Amount DUE: \$ 355.00	Atto	rney I	Ocket	No. 2132.007		
METHOD OF PAYMENT (check one)	FEE (CALCU	LATION	(continued)		
1 The Commissioner is hereby authorized to charge the filing fees and any additional fees to:	3. AE	DITIO	NAL FE	ES:		
Deposit:		_	e Entity	Small Entity		
Account No.	Fee	Fee	Fee	Fee <u>FEE DESCRIPTION</u>		
Deposit	Code	(\$)	Code	(\$) (5) Supplied to 12 to 51 to 5 to 4 to 4 to 51 to 5 to 4 to 4 to 51 to 5 to 5 to 5 to 5 to 5 to 5 to		
Account Name: Charge any additional Applicant claims small	105 127	130 50	205 227	65 Surcharge - late filing fee/oath 25 Surcharge - late provisional		
Fee required under entity status. See. 37 CFR		30	221	25 Surcharge - late provisional filing fee or cover sheet.		
37 CFR 1.15 and 1.17 1.27	139	130	139	130 Non-English specification		
37 CFR 1.13 and 1.17 1.27	147	2520	147	2520 For filing a Request, for Exam.		
2. X Payment Not submitted	112	920*		920* Req. publication of SIR prior		
Check Money Order Other	112	740'	114	Examiner Action		
		110	015			
FEE CALCULATION	115	110	215	55 Extension - first month		
1. FILING FEE	116	400	216	200 Extension - second month		
Lance Forther Court Forther	117	950	217	475 Extension - third month		
Large Entity Small Entity Fee Fee Fee Fee FEE DESCRIPTION/FEE PAID	118	1510 2060	218 228	755 Extension - fourth month 1030 Extension - fifth month		
Code (\$) Code (\$)	119	310	22 6 219	155 Notice of Appeal		
101 710 201 355 Utility filing fee355	120	310	220			
• • • • • • • • • • • • • • • • • • • •				155 Brief in support of Appln.		
106 320 206 160 Design filing fee	21	270	221	135 Req. for Oral Hearing		
107 490 207 245 Plant filing fee	138	1510	138	1510 Petition to Institute Public		
108 710 208 355 Reissue filing fee				Use Proceeding		
114 150 214 75 Provisional filing fee	140	110	240	55 Pet. to revive - unavoidable		
SUBTOTAL (1) <u>\$355.00</u>	141	1320	241	660 Pet. To revive - unintentional		
Fee from	142	1320	242	660 Utility Issue Fee		
2. CLAIMS Extra below Fee Paid	143	450	243	225 Design Issue Fee		
Total Claims $10 - 20 = -3 - x = 9 = -0 - $	144	670	244	335 Plant Issue Fee		
Independent $1 - 3 = -0 - x - 40 = -00$	122	130	122	130 Petitions to Commissioner		
Multiple Dep <u>0</u> x <u>= \$ -0-</u>	123	50	123	60 Petitions re: Provisional		
Claims	126	240	126	240 Sub. Of Infor. Discl. Stm.		
Large Entity Small Entity	581	40	581	40 Record. Patent Assign.		
Fee Fee Fee FEE DESCRIPTION				Per property		
Code (\$) Code (\$)	146	290	246	395 Filing a Submission After		
103 22 203 11 Claims in excess of 20				Final rejection (37 CFR .129(a)		
102 82 202 41 Ind. Claims in excess of	3 140	790	249	395 For each addnl. invention		
102 62 202 41 Inc. Claims in excess of 104 270 204 135 Mult. Dependent claim	J 17/	170	ω ⊤ J	to be examined (37 CFR 1.129(b)		
	ima or	ver Or	ainal D	` ` _		
1						
110 22 210 11 Reissue Claims in excess Other fee (specify)						
20 and over original patent FEE SUBTOTAL(2) \$355.00 / Reduced by Basic filing fee SUBTOTAL(3)SUBMITTED BY:						
Michael A. Slavin						
Typed or printed Name A. Slavin Reg. No. 34,016						
Signature:		D	ate:	04/30/01 Dep. Acct.:		

Atty.2132 007

CERTIFICATE OF EXPRESS MAIL

Express Mail Mailing Label: EL608094654US

I HEREBY CERTIFY that the following correspondence: UTILITY APPLICATION
TRANSMITTAL; FEE CALCULATION SHEET; APPLICATION, INCLUDING CLAIMS; 1 SHEET
OF DRAWINGS; 13 sheets of Appendix; DECLARATION/POWER OF ATTORNEY (unsigned);
Mail Mailing Certificate; RETURN-RECEIPT postcard; regarding the Application entitled:
PROCESS FOR DIAGNOSIS OF PHYSIOLOGICAL CONDITIONS BY CHARACTERIZATION OF
PROTEOMIC MATERIALS.

Commissioner of Patents & Trademarks Box Patent Application Washington DC 20231

on APRIL 30, 2001

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under Section 1001 of Title 18 of the United States Code.

MCHALE & SLAVIN, P.A. 4440 PGA BLVD. SUITE 402 PALM BEACH GARDENS, FL 33410 (561) 625-6575 Cathy Nicholson Legal Assistant